

TRADEMARK ASSIGNMENT

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
APS, LLC		12/12/2012	LIMITED LIABILITY COMPANY:

**RECEIVING PARTY DATA**

Name:	Salon Professional Education Company, LLC
Street Address:	4377 15th Avenue South
City:	Fargo
State/Country:	NORTH DAKOTA
Postal Code:	58103
Entity Type:	LIMITED LIABILITY COMPANY: NORTH DAKOTA

**PROPERTY NUMBERS Total: 9**

Property Type	Number	Word Mark
Serial Number:	77303786	THE SALON PROFESSIONAL ACADEMY
Serial Number:	77303784	THE SALON PROFESSIONAL ACADEMY
Serial Number:	77578124	GROWING SALON LEADERS ONE STUDENT AT A T
Serial Number:	85833272	VIRTUAL SALON CAMPUS
Serial Number:	85833280	V VIRTUAL SALON CAMPUS
Serial Number:	85833283	SPEC.
Serial Number:	85833295	SPEC.
Serial Number:	85833319	SALON PROFESSIONAL EDUCATION COMPANY
Serial Number:	85833320	THE SALON PROFESSIONAL ACADEMY

**CORRESPONDENCE DATA**

Fax Number: 7012370544  
*Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.*

Phone: 7012818822

OP \$240.00 77303786

Email: kelsey@neustel.com  
Correspondent Name: Neustel Law Offices  
Address Line 1: 2534 South University Drive, Suite 4  
Address Line 4: Fargo, NORTH DAKOTA 58103

ATTORNEY DOCKET NUMBER:	THES-001
NAME OF SUBMITTER:	Kelsey Aamot
Signature:	/Kelsey Aamot/
Date:	02/05/2014

Total Attachments: 3  
source=2014-01-28\_Certificate\_of\_Name Change\_for\_APS,\_LLC#page1.tif  
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**Office of the Minnesota Secretary of State**  
**Minnesota Limited Liability Company | Amendment to Articles of Organization**  
*Minnesota Statutes, Chapter 322B*



Read the instructions before completing this form.

Filing Fee: \$55 for expedited service in-person and online filings, \$35 if submitted by mail

1. List the name of this company currently on file with the Office of the Minnesota Secretary of State: (Required)  
APS, LLC

2. The articles of organization for this Limited Liability Company are amended pursuant to Chapter 322B.

**AMENDMENT OPTIONS: Complete as many amendment options as apply. Complete an option only if you are changing the information related to that option.**

3. The company name is changed to:  
Salon Professional Education Company, LLC

4. The registered office address is changed to:  
23657 Fish Lake Trail Pelican Rapids MN 56572  
Street Address (*A post office box by itself is not acceptable*) City State Zip Code

5. The registered agent is changed to:  
Jodi Ellingson

6. List the date the expiration date has changed to in the jurisdiction of its organization, or list the word "perpetual"  
mm/dd/yyyy or Perpetual

7. The business mailing address has changed to:  
4377 15<sup>th</sup> Avenue South Fargo ND 58103  
Address City State Zip Code

8. The articles of organization are otherwise amended as follows:

Article IX is changed to read as follows:  
Article IX  
Preemptive Rights  
Members of this company shall have all preemptive rights as provided in Minn. Stat. § 322B.33.

9. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Jodi Ellingson  
Signature of Authorized Person or Authorized Agent

12-21-12  
Date

**Email Address for Official Notices**

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

jodiellingson@tspafargo.com

**Office of the Minnesota Secretary of State**

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**List a name and daytime phone number of a person who can be contacted about this form:**

David J. Hauff

(701) 235-3300

Contact Name

Phone Number

**Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.**

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?

Yes  No



**Work Item 634606700029**  
**Original File Number 973038-2**

STATE OF MINNESOTA  
OFFICE OF THE SECRETARY OF STATE  
FILED  
12/24/2012 11:59 PM

*Mark Ritchie*

Mark Ritchie  
Secretary of State